

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P99000080846**

1. Entity Name  
**SOBOL INVESTMENTS, INC.**



Principal Place of Business  
**148 W. NEW YORK AVE.  
DELAND, FL 32720**

Mailing Address  
**148 W. NEW YORK AVE.  
DELAND, FL 32720**



05012006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-3595548**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**WANG, LEE  
1736 VALENCIA AVE  
ORMOND BEACH, FL 32174**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Lee Wang* DATE 5/1/06  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SOBOL, JOHN L
STREET ADDRESS	1775 DEER CREEK COURT
CITY-ST-ZIP	SAN JOSE, CA 95148
TITLE	VP
NAME	SOBOL, PATRICIA W
STREET ADDRESS	1775 DEER CREEK COURT
CITY-ST-ZIP	SAN JOSE, CA 95148
TITLE	S
NAME	WILSON, AMANDA
STREET ADDRESS	1775 DEER CREEK COURT
CITY-ST-ZIP	SAN JOSE, CA 95148
TITLE	T
NAME	WANG, LEE
STREET ADDRESS	1736 VALENCIA AVE
CITY-ST-ZIP	ORMOND BEACH, FL 32174
TITLE	D
NAME	SHALER, BARBARA
STREET ADDRESS	140 HARBOR LAKE CIRCLE
CITY-ST-ZIP	WEST PALM BEACH, FL 33413
TITLE	D
NAME	SABOL, MICHAEL
STREET ADDRESS	129 PLIMAGO LANE
CITY-ST-ZIP	WEST PALM BEACH, FL 33415

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05/18/06 80054-012 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: *Lee Wang* DATE 5/1/06 (386) 846-3083  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR